المراجعة الم

## DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(I hereby authorize my attorney to insert the Attorney Dockst No. when it becomes known)

First Named Inventor: Medasani MUNISEKHAR

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

KERATOLYTIC COMPOSITION WITH	ANTI-ALLERGI	C ANTIHNFL	AMMATORY P	ROPERTIES	
the specification of which:				•	
[-] is attached hereto; or					
[X] was filed on 26 Marc	h 2004 as <del>U.S.</del>	Application N	<del>umber or P</del> CT I	nternational Application	n Number
PCT/IN2004/000069, and was amended	on (if applicab	He).			
(I hereby authorise my attorne	ey to insert the s	serial number	and filing date w	vhen it becomes known	)
I hereby state that I have review			tents of the abo	ve identified specification	on, including the claims,
as amended by any amendment specific	ally referred to a	above.			
i acknowledge the duty to disc accordance with Title 37, Code of Federa			erial to the exa	mination of this applicat	ion in
I hereby claim foreign priority application(s) for patent or inventor's cen- other than the United States of America, patent or inventor's certificate, or of any i priority is claimed.	tificate, or § 365 tisted below, an	i(a) of any PC nd have also id	T international a lentified below,	application which design by checking the box, ar	nated at least one country ny foreign application for
Pnor Foreign Application Number(s)	Country	Foreign Priority Date (MM/DD/YYYY)		Priority Not Claimed	Certified Copy At- tached? (Yes/No)
185/KOL/2003	IN	03 27 2003			No
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i hereby claim the benefit und application(s) listed below.	er Title 35, Unite	ed States Cod	e, § 119(e) of a	ny United States provis	ional
Application Number(s)			Filing Date (MM/DD/YYYY)		
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I hereby claim the benefit und and, insofar as the subject matter of each the manner provided by the first paragra- information as defined in Title 37, Code of	h of the claims o	initad States (	ode 6 112 i ac	knowledge the duty to	disclose material

Application Number(s)	Filing Date (MM/DD/YYY)	Status: Patented, Pending, Abandoned	

application and the national or PCT international filing date of this application.

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## Declaration for Patent Application (cont'd.)

(Same as mailing address)

Residence

Atty. Docket No. VISH0101PUSA

I hereby appoint the practitioners associated with Customer Number 22045 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence and telephone calls to <u>BK Domestic Patent Filing Dept.</u> at Brooks Kushman P.C., 1000 Town Center, Twenty Second Floor, Southfield, Michigan 48075, (248) 358-4400.

## CUSTOMER NO.

## 22045

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventors Signature			Date
Mailing address			
Residence	(Same as mailing address)	Citizenship	
Full Name Of Fourth	a Joint Inventor		
Invertors Signature			Date
Mailing address			
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Inventors Signature			Date
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		Citizenship	